## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10730379

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			19				ſ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			(9 minus 20=		• /			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		2			X43=		OR	X86=	172
Mi	JLTIPLE DEPE	NDENT CLAIM P	<u> </u>				+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	L	TOTAL		OR	TOTAL	942
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN SMALL ENTITY	
AMENDMENT A	5.17.04	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 19	Minus	<b></b> 2	Ø	= Q		X\$ 9=	-	OR	X\$18=	
AME	Independent	. 5	Minus	***	5	- C)		X43=		OR	X86=	
	FINST PRESE	NTATION OF MU	LIPLE DEF	ENDENI	CLAIM			+145=		OR	+290=	
								TOTAL DDIT. FEE			TOTAL ADDIT, FEE	0
		(Column 1)		(Colun	nn 2)	(Column 3)		JUII. 1 CC				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CI 4114	=		X43=		OR	X86=	
	PIRST PRESE	NTATION OF ML	LIPLE DEP	ENDEN	CLAIM		'	+145=		OR	+290=	
							L Al	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colun		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***	01.5	-		X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	LTIPLE DEP	ENDENT	CLAIM	U	-	+145=			+290≃	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR OR	TOTAL	
***	f the "Highest Nu	mber Previously Pa iber Previously Pak iber Previously Pak	id For" IN THI	S SPACE is	s less tha	n 3, enter "3."	AL.	DIT. FEE L d in the app	ropriate box		ADDIT. FEE! umn 1.	